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Bib Data Sheet

CONFIRMATION NO. 5198

<b>SERIAL NUMBER</b> 09/686,090	<b>FILING OR 371(c) DATE</b> 10/12/2000 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2685	<b>ATTORNEY DOCKET NO.</b> Q61276
<b>APPLICANTS</b> Toshiyuki Oda, Tokyo, JAPAN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> JAPAN 290925/1999 10/13/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/04/2000</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>BA</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 8
			<b>INDEPENDENT CLAIMS</b> 6	
<b>ADDRESS</b> SUGHRUE, MION, ZINN, MACPEAK & SEAS 2100 Pennsylvania Avenue, M.W. Washington ,DC 20037				
<b>TITLE</b> CDMA RECEIVER AND DCMA DEMODULATOR WITH AGC CIRCUIT				
<b>FILING FEE RECEIVED</b> 1306	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/686,090	<b>FILING DATE</b> 10/12/2000 <b>RULE</b> -	<b>CLASS</b> <del>370</del> 455	<b>GROUP ART UNIT</b> <del>2664</del> 455	<b>ATTORNEY DOCKET NO.</b> Q61276
<b>APPLICANTS</b> Toshiyuki Oda, Tokyo, JAPAN; <b>** CONTINUING DATA</b> <i>None dxn</i> <b>** FOREIGN APPLICATIONS</b> <i>Yes dxn</i> JAPAN 290925/1999 10/13/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 12/04/2000</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>James F. Suggs</i> Acknowledged <i>Examiner's Signature</i> Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 8
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> SUGHRUE, MION, ZINN, MACPEAK & SEAS 2100 Pennsylvania Avenue, M.W. Washington, DC 20037				
<b>TITLE</b> CDMA receiver AGC circuit and CDMA demodulator				
<b>FILING FEE RECEIVED</b> 1220	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	